PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

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	Attorne	ey Docket No.	A8130.0028/P028-A				
1171117V		ventor	Reinhold Schmieding				
PATENT APPLICATION	7 77 51 77		ACL RECONSTRUCTION USING				
TRANSMITTAL	Title		BONE CROSS PIN IMPLANT				
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Expres	s Mail Label No.					
			MS Patent Application				
APPLICATION ELEMENTS		ADDRESS TO: Commissioner for Patents P.O. Box 1450					
See MPEP chapter 600 concerning utility patent application cor	Alexandria, VA 22313-1450						
1. X Fee Transmittal Form (e.g., PTO/SB/17)			M or CD-R in duplicate, large table or				
(Submit an original, and a duplicate for fee processing)		Computer Program (Appendix)					
2. Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotice and/or Affilia Acid Sequence Submission (if applicable, all necessary)					
3. X Specification [Total Pages 15	51	a. Computer Readable Form (CRF)					
(preferred arrangement set forth below) - Descriptive title of the invention	b. Specificati	ion Sequence Listing on:					
 Cross Reference to Related Applications 	i.	CD-ROM or CD-R (2 copies); or ii. Paper					
 Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, 		c. State	ments verifying identity of above copies				
or a computer program listing appendix - Background of the Invention		ACC	OMPANYING APPLICATION PARTS				
 Brief Summary of the Invention Brief Description of the Drawings (if filed) 		9. Assignm	ment Papers (cover sheet & document(s))				
Detailed Description Claim(s) Abstract of the Disclosure			t 3.73(b) Statement Power of Attorney				
	B 1	i — '	Translation Document (if applicable)				
	1)		tion Disclosure Copies of IDS ent (IDS)/PTO-1449 Citations				
a. Newly executed (original or copy)	13. X Preliminary Amendment						
b. X Copy from a prior application (37 CFR 1.63(d))		14. X Return Receipt Postcard (MPEP 503)					
(for continuation/divisional with Box 18 completed)	(Should be specifically itemized)						
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s)	(if foreign priority is claimed)						
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.						
,,,,		17. Other:					
6. Application Data Sheet. See 37 CFR 1.76							
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the							
specification following the title, or in an Application Data Sheet	under 37	CFR 1.76:					
X Continuation Divisional Continuation		CIP) of prior appli	2704				
The appreciation intermediate	J. Yu		Art Unit: 3764				
For CONTINUATION OR DIVISIONAL APPS only: The entire under Box 5b, is considered a part of the disclosure of the acco	omnanvin	a continuation or di	visional application and is hereby incorporated by				
reference. The incorporation can only be relied upon when a p		NDENCE ADDR					
04000		OR	Correspondence address below				
DICKSTEIN SHAPIRO MORIN Stephen A. Soffen	ı & OS	HINSKY LLP					
Address 2101 L Street NW							
City Washington Sta		DC	Zip Code 20037-1526				
Country US Tea	lephone	(202) 785-97	00 Fax (202) 887-0689				
Name (Print/Type) Stephen A. Soffen		Registration	No. (Attorney/Agent) 31,063				
Signature Had C No	11_	-	Date September 22, 2003				

Signature

Date

September 22, 2003

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Signature

	Complete if Known							
FEE TRANSMITTAL		Applie	ation	Numb				
		Application Number		Numb	September 22, 2003	_		
for FY 2003		Filing Date		1 Inver				
Effective 01/01/2003, Patent fees are subject to annual revision.		First Named Inventor Examiner Name			Not Yet Assigned			
And line at all in a small and the atoms. See 27 CSB 4 27						_		
x Applicant claims small entity status. See 37 CFR 1.27		Art Unit N/A Attomey Docket No. A8130.0028/P028-A						
TOTAL AMOUNT OF PAYMENT (\$) 375.00		Attom	ey Do			_		
METHOD OF PAYMENT (check all that apply)	<u> </u>	FEE CALCULATION (continued)						
Check Credit Money Other None	3. ADDITIONAL FEES							
Deposit Account:	1 250	e Entity	Small	Entity				
Deposit Account 04-1073	Fee	Fee	Fee	Fee	- -			
Number	Code	(\$)	Code	(\$)	Fee Description Fee Pa	ıid 		
Deposit Account Dickstein Shapiro Morin &	1051	130	2051	65	Surcharge – late filing fee or oath			
Name Oshinsky LLP The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet.			
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English specification	٦		
Charge any additional fee(s) during the pendency of this application	1812	2,520	1812	2,520	For filing a request for ex parte reexamination			
	1804	920*	1804	920*	Requesting publication of SIR prior to	٦		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Examiner action Requesting publication of SIR after	٦		
FEE CALCULATION	1251	110	2251	55	Examiner action Extension for reply within first month	ㅓ		
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month	٦		
Large Entity Small Entity	1253	930	2253	465	Extension for reply within third month	П		
Fee Fee Fee Fee Fee Description Fee Paid	1254	1,450	2254	725	Extension for reply within fourth month	٦		
Code (\$) Code (\$) 1001 750 2001 375 Utility filing fee	1255	1,970	2255	985	Extension for reply within fifth month	٦		
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal			
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal			
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	_		
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55	Petition to revive – unavoidable	_		
\',_\'	1453	1,300	2453	650	Petition to revive - unintentional	4		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501	1,300	2501	650	Utility issue fee (or reissue)	\dashv		
Claims below Fee Paid	1502	470	2502	235	Design issue fee	_		
Total Claims 9 -20** = x = 0.00	1503	630	2503	315	Plant issue fee	4		
Independent 1 -3** = X = 0.00	1460	130	1460	130	Petitions to the Commissioner	_		
Multiple Dependent	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	_		
Large Entity Small Entity	1806	180	1806	180	Submission of Information Disclosure Stmt	_		
Fee Fee Fee Fee Fee Description	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	- 1		
1202 18 2202 9 Claims in excess of 20	1809	750	2809	375	Filing a submission after final rejection			
1201 84 2201 42 Independent claims in excess of 3		7-0			(37 CFR 1.129(a)) For each additional invention to be	\dashv		
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	examined (37CFR 1.129(b))	_		
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801	375	Request for Continued Examination (RCE) Request for expedited examination	\dashv		
1205 18 2205 9 "Reissue claims in excess of 20 and over original patent	1802 Other	900 fee (spe	1802 cifv)	900	of a design application	4		
	1	uced by I	•	ling Fee	e Paid SUBTOTAL (3) (\$) 0.0	00		
**or number previously paid, if greater; For Reissues, see above	Red	uceu by I	Dasic F1	miy ret	6 F 200 10 1AL (3) (4) 0.1	50		
SUBMITTED BY (Complete (if applicable))						=		
Name (Print/Tyne) Stephen A Soffen	Regist	ration No	2. 21	063	Telephone (202) 828-4879	_		